



Batavia RSVP, Inc.
 100 N. Island Ave., Batavia, IL 60510
 630-406-9993
 BataviaRSVP.org RSVPBatavia@gmail.com

RSVP Volunteer Application Form

Name _____ Date _____

Address _____ Phone _____

City _____ State _____ Zip _____ Birthdate _____

Email Address _____

Can you communicate in a different language? _____

Are you a veteran? Yes _____ No _____

For Insurance Purposes:

Driver's License Number _____

The following are for those volunteering to drive:

Name of Auto Insurance Company _____

Insurance Policy Number _____

Person to notify in emergency _____ Phone _____

Non-Relative Reference Name: _____

Non-Relative Reference Address and Phone Number:

Address _____ Phone _____

I HAVE AND WILL MAINTAIN MY OWN HEALTH, AUTO, AND AUTO LIABILITY INSURANCE. I UNDERSTAND THAT RSVP WILL BE A SECONDARY CARRIER IN CASE OF AN ACCIDENT.

Signature _____

Please check the activities that you would be willing to do:

_____ Help at the RSVP office

_____ Provide rides for doctor appointments and local errands

_____ Enrich senior lives with friendly visits